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APPLICANTS

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** CONTINUING DATA *****

This application is a CIP of 08/795,123 02/07/1997 ABN *OK*
 which claims benefit of 60/011,352 02/08/1996 *JMK*

** FOREIGN APPLICATIONS ***** *Not to be filed*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 03/27/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	Examiner's Signature Initials	OH	15	11	3

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TITLE

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FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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